

NOAA form 89-814 Prescribed by NOAA Inspection Manual 25 (draft 11-8-99)			U.S. DEPARTMENT OF COMMERCE NATIONAL OCEANIC AND ATMOSPHERIC ADMINISTRATION			CONTRACT NUMBER: FEDERAL TAX ID # : TODAY'S DATE:				
REQUEST FOR INSPECTION SERVICES										
NAME OF REQUESTER				SERVICING AGENT'S NAME/PHONE NUMBER						
STREET ADDRESS				STREET ADDRESS						
CITY		STATE		ZIP CODE		CITY		STATE		ZIP CODE
CONTACT NAME		PHONE NO.		FAX NO.		TYPE INSPECTION REQUESTED <input type="checkbox"/> Lot Inspection Certificate <input type="checkbox"/> Export Health Certificate <input type="checkbox"/> Certificate of Origin <input type="checkbox"/> EU Certificate <input type="checkbox"/> Other:				
LOCATION OF PRODUCTS – NAME										
LOCATION OF PRODUCTS – STREET ADDRESS										
CITY		STATE		ZIP CODE		SPECIAL INSTRUCTIONS (<i>Buyer Specifications, country requirements, etc</i>) <input type="checkbox"/> Market Specifications: <input type="checkbox"/> Product on FDA Hold?				
ASSESS CHARGES TO:						DISPOSITION OF SAMPLES: <input type="checkbox"/> Return <input type="checkbox"/> Destroy <input type="checkbox"/> Charity				
STREET ADDRESS										
Same						INSPECT FOR: <input type="checkbox"/> Quality & Condition <input type="checkbox"/> Minimum U.S. Grade Attributes <input type="checkbox"/> U.S. Grade A Attributes <input type="checkbox"/> Net Weight <input type="checkbox"/> Size or Count <input type="checkbox"/> Other: <u> origin </u>				
CITY		STATE		ZIP CODE						
CERTIFICATE FORWARDED TO:										
STREET ADDRESS										
Same										
CITY		STATE		ZIP CODE						
REMARKS										
LOT NUMBER		BRAND		PRODUCT		NUMBER OF CARTONS / CASES & SIZE			TOTAL POUNDS	
NAME OF SHIPPER (<i>For export only</i>)						NAME OF CONSIGNEE (<i>For export only</i>)				
ADDRESS						ADDRESS				
PORT OF EXPORT			VESSEL OR AIRLINE			PORT OF DESTINATION				
APPLICANT (<i>Printed Name & Signature</i>)								DATE		

Information Collection Notification – NOAA Form 89-814

This information collection is authorized under 50 CFR §260.15. The information will be used to record applicants requesting inspection services on non-contractual basis. Public reporting burden for this collection of information is estimated to average 5 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of the collection of information, including suggestions for reducing this burden to the Seafood Inspection Program, 1315 East-West Highway, Silver Spring, MD 20910. This information is required in order to receive inspection services on non-contract basis.

Notwithstanding any other provision of the law, no person is required to respond to, nor shall any person be subject to a penalty for failure to comply with, a collection of information subject to the requirements of the Paperwork Reduction Act, unless that collection of information displays a currently valid OMB control Number.